## NCDA&CS Research Stations <u>Increasing Meat Processing Efficiency and Capacity (IMPEC)</u> Grant Application Cover

## **Grant Proposal Due: Postmarked by Close of Business October 12, 2020**

Plant Name:	
Establishment Number:	
Grant Request: \$	Total Project Cost: \$
Start Date: July 1, 2020	(Include Matching Funds)
End Date: <u>December 30, 2020</u>	
Organization's Fiscal Year: (i.e.: Jan-I	Dec, July-June)
Organization's Federal EIN:	
Organization's DUNS Number:	
Mailing Address:	
Physical Address (if mailing is PO Box	x):
Web site (if available):	
Project Leader / contact information:	
Telephone: (O)(C)	
E-mail:	

Contract Administrator / contact information:	
	· ·
Telephone: (O) (C)	
E-mail:	
Counties in North Carolina the project will be co	nducted:

## **Special check list for Non-Governmental organizations:**

- A copy of your Organization's Federal EIN ID letter <u>must</u> be included with your application.
- Does your organization have a board approved and implemented Conflict of Interest policy? A copy of your Conflict of Interest policy must be presented prior to contract execution. A COI template is available on the NCDA&CS web site at www.ncagr.gov.
- Two original notarized Sworn Statement of No Overdue Taxes letters must be presented <u>prior</u> to contract execution and funds release. An example of this form is available on the NCDA&CS web site at www.ncagr.gov.

## **Authorized Official's Signature:**

An authorized official of the organization **MUST** sign in **BLUE INK** the following statements that will bind the organization to the representations made in the grant.

THE FUNDS GRANTED BY THE NORTH CAROLINA DEPARTMENT OF AGRICULTURE & CONSUMER SERVICES WILL BE USED EXCLUSIVELY FOR THE PURPOSES FOR WHICH THEY ARE GRANTED.

THE INFORMATION PROVIDED IN THIS APPLICATION IS CORRECT AND COMPLETE AND THE PERSON SIGNING THIS APPLICATION IS AUTHORIZED TO BIND THE APPLICANT.

THE APPLICANT ASSURES THE NCDA&CS THAT IT WILL PERMIT AUDITS AND SITE VISITS FOR THE PROJECT DESCRIBED IN THIS APPLICATION.

THE APPLICANT UNDERSTANDS THAT THIS APPLICATION AND ALL ATTACHMENTS SUBMITTED WITH THIS APPLICATION ARE PUBLIC RECORDS.

Applicant Organization:			
Signature	Date		
Print Name & Title			
Witnessed by			
Witnessed by:	Date		
Print Name & Title			